

**Building Renewal Grant Application**

**Initial Submission Date:**

**Application ID:** 453

**Resubmittal Date:**

Please provide as much of the requested information as possible. SFB staff will assist in developing required information that is not currently available.

**District Name:** Laveen Elementary District

**Superintendent:** Dr. Bill Johnson

**Contact Person:** Everette Cole

**Contact Phone Number:** 602-237-9100

**Contact Email:** ecole@laveeneld.org

**School Site:** Cheatham Elementary

**Buildings:**

**Description of Problem**

Please include a detailed description of the issues, as well as a description of and a copy of any professional studies, citations or reports from government entities, recommended solutions, and any cost information or estimates. If additional space is needed, please attach.

**Project Category:** HVAC

**Are any of the above-described issues in buildings or part of buildings that are leased to another entity, including a district sponsored charter school?** N

**Available Funding**

Current unencumbered building renewal fund balance (Fund 690):	\$0.00
Amount of Local funds planned for this project	\$0.00

Please outline any associated insurance coverage.

In accordance with our Insurance policy, appendix A.3 Section 15.2 Perils Excluded, loss caused by or resulting from wear and tear to covered property is not covered. Therefore, the District must cover this expense themselves

**Liaison:** Cruse

pcruse@azsfb.gov

602-364-1193

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Superintendent Printed Name

\_\_\_\_\_  
Superintendent Signature

\_\_\_\_\_  
Date